

EXHIBIT 57

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

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IN RE: NATIONAL PRESCRIPTION MDL No. 2804  
OPIATE LITIGATION

Case No.  
17-md-2804

Judge Dan Aaron  
Polster

This document relates to:  
The County of Summit, Ohio, et al. v. Purdue  
Pharma L.P., et al., Case No. 18-OP-45090

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Videotaped Deposition of
GRETA JOHNSON, 30(b)(6)

January 15, 2019

8:30 a.m.

Taken at:

Sheraton Suites Akron
1989 Front Street - Portage Room
Cuyahoga Falls, Ohio

Stephen J. DeBacco, RPR

<p style="text-align: right;">Page 190</p> <p>1 Have you thought about it?</p> <p>2 A. No. Again, to me, it is an</p> <p>3 aggregate harm to the community.</p> <p>4 Q. All right. I'd like you to pull</p> <p>5 back out --</p> <p>6 MS. WINNER: Oh, no, we didn't. I</p> <p>7 thought we already marked this. Did we mark</p> <p>8 this already? I thought we did mark this.</p> <p>9 Could I just see the --</p> <p>10 THE WITNESS: Sure.</p> <p>11 MS. WINNER: -- exhibits quickly?</p> <p>12 My apologies.</p> <p>13 THE WITNESS: I'm sorry. They're</p> <p>14 not in order.</p> <p>15 MS. WINNER: That's all right.</p> <p>16 You're not required to keep them in order.</p> <p>17 MS. KEARSE: You're working hard</p> <p>18 enough.</p> <p>19 MS. WINNER: Oh, here it is,</p> <p>20 Exhibit 7. I think this is Exhibit 7.</p> <p>21 Q. If you pull out Exhibit 7.</p> <p>22 A. Sure.</p> <p>23 Q. And look at page 14.</p> <p>24 A. Okay.</p> <p>25 Q. And you see at the bottom there's</p>	<p style="text-align: right;">Page 192</p> <p>1 to have suffered in this case?</p> <p>2 A. Okay. Let me take a look.</p> <p>3 Q. Sure. Go ahead.</p> <p>4 A. I've reviewed it. Could you</p> <p>5 restate the question?</p> <p>6 Q. Sure. Is this an accurate list of</p> <p>7 the injuries that Summit County claims to have</p> <p>8 suffered in this case?</p> <p>9 A. I -- I feel that it's missing some</p> <p>10 of the major losses that we've incurred.</p> <p>11 Q. Okay. What's missing? I want to</p> <p>12 go back through the list, but before we do</p> <p>13 that, why don't you tell me what's missing from</p> <p>14 the list.</p> <p>15 A. The loss of human capital. And</p> <p>16 certainly there's not a dollar figure you can</p> <p>17 put on the thousands of lives we've lost.</p> <p>18 Q. Is that an injury for which Summit</p> <p>19 County is seeking damages in this case?</p> <p>20 A. It is, because we're seeking</p> <p>21 damages due to the total harm caused by this</p> <p>22 epidemic. The loss of life that really</p> <p>23 exploded in 2016 created another loss, and that</p> <p>24 was a loss of a sense of community. And when</p> <p>25 you talk about the aggregate harm, that is a</p>
<p style="text-align: right;">Page 191</p> <p>1 Interrogatory 18 --</p> <p>2 A. I do.</p> <p>3 Q. -- which asks for categories of</p> <p>4 injury.</p> <p>5 A. Uh-huh.</p> <p>6 Q. And then for some other</p> <p>7 information. But then -- if you then go to the</p> <p>8 response, and there's a bullet point list of</p> <p>9 categories of injury.</p> <p>10 Do you see that?</p> <p>11 A. I do.</p> <p>12 Q. Do you -- is this one of the</p> <p>13 interrogatory answers that you reviewed?</p> <p>14 A. It is.</p> <p>15 Q. Does this list look familiar to</p> <p>16 you?</p> <p>17 A. Yes. Sorry.</p> <p>18 MS. WINNER: Are you okay? Do you</p> <p>19 need a break?</p> <p>20 THE WITNESS: No, I'm okay.</p> <p>21 Q. As you understand it, does -- is</p> <p>22 this a -- does this -- is everything on this</p> <p>23 list -- let me strike that.</p> <p>24 Is this a -- an accurate list of</p> <p>25 the injuries that Summit County has -- claims</p>	<p style="text-align: right;">Page 193</p> <p>1 harm that we will be trying to recover from for</p> <p>2 decades.</p> <p>3 To declare a state of emergency in</p> <p>4 Summit County was not something that was easily</p> <p>5 reached, because it sends an alarm bell to</p> <p>6 businesses and to people seeking to relocate</p> <p>7 that we have a problem. And we're no different</p> <p>8 than anyone else, but we were the grownups in</p> <p>9 the room enough to acknowledge what the problem</p> <p>10 was and use the platform of the executive's</p> <p>11 office to bring attention to it.</p> <p>12 So the losses that are monetized</p> <p>13 certainly here, I know that Brian can speak to</p> <p>14 those directly and that Ms. Miller-Dawson can</p> <p>15 as well.</p> <p>16 But the aggregate loss is -- is not</p> <p>17 limited to what you can put on a paper. The</p> <p>18 overwhelming sense of hopelessness that took</p> <p>19 over this community in 2016, you can't monetize</p> <p>20 that. Every single day the newspaper was</p> <p>21 reporting on the overdose death rates. You</p> <p>22 could not go into a community setting where</p> <p>23 there were not weeping mothers talking about</p> <p>24 their children.</p> <p>25 So you asked me before if I had</p>

<p style="text-align: right;">Page 194</p> <p>1 personal contact with it, and I'm lucky. I'm 2 lucky in that my family has not. But it is 3 personal to me when parents and community 4 members come to their government looking for 5 answers, looking for help, those can't be 6 monetized. Those can't be bullet-pointed, 7 because that loss of human capital and the loss 8 of trust in the community, in doctors, in 9 patient care, because they know now how their 10 kids started. They know what caused this, 11 and -- and that is a harm that this community 12 will be trying to rebuild for decades. 13 Q. Okay. Ms. Johnson, what I'm asking 14 you right now is whether there are any injuries 15 for which Summit County is seeking damages in 16 this case that are not listed in the response 17 that appears on pages 15 to 17 of this exhibit. 18 A. The medical -- 19 (Telephonic interruption.) 20 MS. WINNER: If you're on the 21 phone, if you would please put yourself on 22 mute. 23 A. Are the increased costs to the 24 medical examiner's office listed here? 25 Q. I'm sure it is. If not, we'll come</p>	<p style="text-align: right;">Page 196</p> <p>1 The other part of that, opioid 2 epidemic that impacts that, is that we have 3 created a new class of felons who cannot seek 4 certain employment and might not be able to 5 seek the employment they had prior to falling 6 victim to addiction. 7 So I think there's -- there is a 8 loss that's beyond just the physical presence 9 of people we've lost, but also the ability of 10 people to work in certain fields because of the 11 felonization of -- of this epidemic. 12 Q. Anything else that's not on the 13 list? An injury for which Summit County seeks 14 damages in this case? 15 A. I think it could be argued that -- 16 the very last bullet point is cost for child 17 services and foster care for opioid-dependent 18 babies and foster children, so that's just a 19 really small portion of it. 20 Our -- our Children's Service Board 21 had to seek an increase in their levy this 22 year. And levy campaigns cost money. And the 23 driving factor behind the request for increase 24 is the opioid epidemic. And so the costs of 25 that campaign really to try and support this</p>
<p style="text-align: right;">Page 195</p> <p>1 back to it. 2 A. The other costs that I think should 3 be reflected -- and again, probably tough to 4 monetize -- is the compassion fatigue that our 5 first responders and treatment providers are 6 incurring, and sort of the resources that we're 7 trying to put toward that effort of making sure 8 that those folks are supported, that they don't 9 become overwhelmed by hopelessness, and that 10 they don't become overwhelmed by the sheer 11 volume and turn cold to it. 12 So there have been efforts to try 13 and address that, both through the medical 14 community and through the first responder 15 community and all of those things. Any time 16 there's an investment of time, there's an 17 investment of treasure, and I think that that 18 is something that's missing. 19 Q. Anything else? 20 A. I think that there's also -- the 21 portion that talks about the loss of tax 22 revenue due to the decreased efficiency and 23 size of the working population, I read that as 24 we had a lot of people die, so our population 25 decreased.</p>	<p style="text-align: right;">Page 197</p> <p>1 fundamental service I feel like could be 2 included with the Children's Services portion. 3 Q. Anything else? I'm not asking you 4 to explain anything that's here. I'm going to 5 go -- 6 A. Sure. 7 Q. -- through each item that's on the 8 list. I just wanted to know if there's 9 anything else that's not on the list. 10 A. I don't see anything that's 11 standing out right now. 12 Q. Okay. Well, let's go back to the 13 top of the list, then. 14 A. Okay. 15 Q. The first item is, "Losses caused 16 by the decrease in funding available for 17 Plaintiff's public services for which funding 18 was lost because it was diverted to other 19 public services designed to address the opioid 20 epidemic." 21 What public services -- for what 22 public services was funding lost because it was 23 diverted to other public service? 24 A. Well, specifically in Summit County 25 we have deferred capital improvements. We've</p>

<p style="text-align: right;">Page 198</p> <p>1 deferred, you know, what I would call 2 enhancement projects, things meant to enhance 3 our community because our resources were 4 laser-focused on the opioid epidemic. 5 So where public health, for 6 instance, really would like to spend their time 7 promoting this T21 initiative that they have, 8 eliminating the ability for our youth to buy 9 tobacco products. A lot of science behind how 10 tobacco can change your brain makeup and how 11 it's important to not do that at an early age. 12 I know that that is an initiative they take 13 really seriously and wanted to promote, but it 14 really takes a back seat to the opioid 15 strategies and -- and programs. 16 Additionally, in Summit County 17 we've got health issues like anyone else. I 18 didn't know that diabetes was such a huge 19 health issue in Summit County. It is. It's 20 our number one health issue, outside of 21 addiction, that -- that public health was 22 targeting. And -- and all of those things get 23 pushed to the side. Those important community 24 initiatives get pushed to the side, because 25 when people are dying immediately, you know,</p>	<p style="text-align: right;">Page 200</p> <p>1 perform several autopsies for outside agencies 2 for cost, and that was a stream of revenue that 3 we were able to help fund some of -- of the 4 operations there. Can no longer do that 5 because we don't have the capacity to do it, 6 and our -- and the funds there have to go to 7 what's happening in front of them. 8 I know that we have used grant 9 dollars to help support the expansion of our 10 drug courts, that perhaps those dollars could 11 have been used in a prevention setting or could 12 have been used for some other law enforcement 13 purpose, but because of the need for increased 14 capacity in drug courts, we -- we have 15 designated grant dollars for that as well. 16 And -- and likewise, those judges, 17 their time that would normally have been spent 18 on a variety of different cases is focused 19 on -- on drug cases, and certainly a huge 20 percentage of which are opioids. 21 I'm trying to go around the county 22 in my mind. 23 I -- that's -- that's -- I think 24 that's where I'm at on that. 25 Q. Well, you said -- let me take you</p>
<p style="text-align: right;">Page 199</p> <p>1 it's -- it's all hands on deck for that. 2 Q. So -- 3 A. Obvious- -- 4 Q. Go ahead. 5 A. With law enforcement, we have 6 detectives who are, you know, responding to 7 overdose cases frequently. And those, as we've 8 discussed, are incredibly difficult to 9 investigate for a myriad of reasons, and their 10 time is, therefore, tied up in those cases 11 rather than, you know, folks who have had their 12 home burglarized or their car stolen. 13 And we also have a lot of our 14 resources being put into things like our Quick 15 Response Teams that we never had to do before, 16 but we know that Quick Response Teams are 17 effective, and so we put money toward them. So 18 the number of other things that don't get the 19 attention or the money that they typically 20 would or should get because we're busy trying 21 to save people's lives with -- with these 22 efforts. 23 I know that in the medical 24 examiner's office we have lost a stream of 25 revenue. Our medical examiner's office used to</p>	<p style="text-align: right;">Page 201</p> <p>1 through some of these. This was -- has money 2 been taken away -- that was already allocated 3 to T21 taken away from it? 4 A. I don't know that money was taken 5 away, but certainly focus. 6 Q. How about money that was dedicated 7 to diabetes, whatever was going to be done 8 about diabetes, has anything been taken away 9 from that? 10 A. I -- again, I think where you've 11 got time invested, you know, from people, 12 that's money. So when you take people off of, 13 you know, particular initiatives and refocus 14 them on something else, that is a diversion 15 of -- probably not the right word -- that's a 16 shift in dollars. 17 Q. Were specific people taken off 18 diabetes? 19 A. I don't know that for sure. I just 20 know that that's not something that they are 21 focused on. I shouldn't say that. That's 22 unfair. 23 I know that what is coming out of 24 public health frequently, and investments of 25 new dollars are going into are ways to mitigate</p>

<p style="text-align: right;">Page 202</p> <p>1 harm, harm -- harm reduction for the opioid 2 crisis. 3 Q. Okay. What -- but this bullet 4 point talks funding being diverted to other 5 public services -- 6 A. Right. 7 Q. -- so my question is, what was 8 their -- what was the specific funding or -- or 9 resources, whether it was particular people, 10 that -- that was supposed to be -- you know, 11 was allocated out for diabetes and got diverted 12 elsewhere? 13 A. I don't -- I don't know how to 14 specifically answer what was allocated for 15 diabetes, but I know we spent \$10,000 on 16 fentanyl strips. \$10,000 that could have been 17 spent on diabetes prevention. \$10,000 that 18 could have been spent on T21. But because harm 19 reduction is so critical in our community, 20 \$10,000 was spent on fentanyl strips. 21 The increase in dollars that are 22 being spent on the needle exchange. Certainly 23 those are dollars that weren't previously being 24 spent on needle exchange, but because the 25 demand is so high and the harm reduction</p>	<p style="text-align: right;">Page 204</p> <p>1 overdoses. 2 Q. Are there any -- is -- is the -- is 3 Summit County seeking damages in this case for 4 injuries suffered by the City of Akron? 5 THE WITNESS: Thank you. 6 A. Well, I mean, we don't -- we are 7 separate entities, certainly. Akron's in 8 Summit County, and what happens in Akron does 9 affect Summit County. So an arrest that's made 10 in the City of Akron by Detective Leonard, that 11 becomes a Summit County case. It's a felony. 12 So the City of Akron arrest goes 13 through Akron Municipal Court, comes to Summit 14 County Common Pleas court, goes through our 15 prosecutor's office, goes through our Common 16 Pleas court system, our drug court. Our ADM 17 provides services. Our health department 18 provides services. 19 So we're certainly separate 20 entities, but what happens with nearly half of 21 our population impacts what goes on in Summit 22 County. 23 Q. Is Summit County seeking damages in 24 this case for injuries suffered by the City of 25 Akron?</p>
<p style="text-align: right;">Page 203</p> <p>1 benefit of that is so great, that those dollars 2 are not being spent on those other things. 3 Q. What -- in a -- in a law 4 enforcement category, you say that there are 5 people who are investigating over- -- 6 overdoses. Were those people who were 7 previously assigned to do something else 8 specifically, and if so, what? 9 A. Well, there are two detectives in 10 the Summit County Sheriff's Office who are 11 general division detectives, but they respond 12 to any fatal overdose scene. So that means 13 they leave their desk and whatever rape, 14 robbery or homicide they're working on and 15 their attention has to be focused on -- on this 16 overdose. 17 I know the City of Akron had two 18 detectives who were working in, you know, 19 the -- the drug unit who were earmarked 20 specifically to investigate overdose deaths 21 because there were so many. 22 That's to say nothing of all of the 23 other police officers throughout the county who 24 would be proactively policing and are spending 25 lots of time on calls for service regarding</p>	<p style="text-align: right;">Page 205</p> <p>1 MS. FLOWERS: Objection. Asked and 2 answered. 3 A. We're -- we're both independently 4 seeking our own damages, is the way I 5 understand the -- the case. 6 Q. So if the -- if the City of Akron 7 police department suffers an injury, that's not 8 part of the injury for which Summit County is 9 seeking damages, correct? 10 MS. KEARSE: Objection. 11 A. Again, it's tough because you get 12 arrested in the city of Akron, you're coming to 13 the Summit County Jail. So I -- I know that 14 they're -- that we're seeking -- we're two 15 separate plaintiffs, certainly, but the 16 aggregate harm, to me, is what I always come 17 back to. 18 You know, I will leave to the 19 lawyers to make the determination of -- of 20 where that line separates, but to me it's 21 difficult for me to separate out what happens 22 in Akron from what happens in Summit County 23 because they're the same thing. Everything in 24 Akron is in Summit County. 25 Q. Is the --</p>

<p style="text-align: right;">Page 206</p> <p>1 MS. KEARSE: And, Counselor, just 2 again for the record, we've got 30(b)(6) 3 representatives who are going to go 4 specifically to the dollar figures for the City 5 of Akron and for the County of Summit, so I 6 think those questions are probably more 7 appropriate for the 30(b)(6) representatives 8 who will deal specifically with the costs and 9 dollars associated with the recovery. 10 Q. Are there any statistics maintained 11 or -- by Summit County concerning any changes 12 in law enforcement activities in areas other 13 than drug enforcement that you attribute to the 14 opioid problem? 15 A. I'm sorry. Could you say that 16 again, please? 17 Q. Sure. Are there any statistics 18 maintained by Summit County concerning any 19 changes in law enforcement activity in areas 20 other than drug enforcement that you attribute 21 to the opioid problem? 22 MS. KEARSE: Object to form. 23 A. I -- I feel like I'm -- I'm sorry. 24 I feel like I'm still missing it. Changes 25 in --</p>	<p style="text-align: right;">Page 208</p> <p>1 counties? 2 A. Yes. 3 Q. Okay. So this is just -- this is 4 just a money-making proposition for the County 5 that you're not able to do anymore; is that 6 right? 7 MS. KEARSE: Object to form. 8 A. Yeah, it wasn't just about making 9 money. We have highly skilled physicians who 10 have different certifications in our medical 11 examiner's office. I believe Dr. Kohler is 12 one of only -- it's either 150 or 200 in the 13 country with certain qualifications. So often 14 her expertise was helpful in difficult cases. 15 Q. Well, and the -- the Quick Response 16 Teams, were the- -- are these people who were 17 diverted from other activities, and if so, 18 what? 19 A. Well, any time a police officer is 20 responding to an overdose, they're not 21 proactively policing. They're not being 22 present in the community. They're taken out of 23 the community for a specific purpose. So 24 again, it's one of those it's hard to quantify 25 because it's the stuff you don't catch.</p>
<p style="text-align: right;">Page 207</p> <p>1 Q. Well, you say that -- you say that 2 these people who were investigating drug 3 overdoses are not investigating something else. 4 Was there -- are there any statistics that are 5 maintained on what other crime is out there 6 and -- and whether it's being addressed at a 7 different level than it was before? 8 A. I see what you're saying. 9 Certainly the -- the sheriff's 10 department has its annual report, as does the 11 Akron Police Department. 12 But again, it's hard to measure the 13 crime we don't catch. We're so focused on 14 opioids and the havoc that they have caused 15 that it would be difficult to graph the crime 16 that they're not catching because of the -- the 17 attention being paid to opioids. 18 Q. Do you know whether clearance rates 19 have changed? 20 A. I don't know that. I -- I don't -- 21 I don't know that. 22 Q. Now, you said that the medical 23 examiner's office is no longer able to earn 24 income for doing autopsies for other people, 25 for other counties. Was that, like, other</p>	<p style="text-align: right;">Page 209</p> <p>1 But any time a police officer is 2 dispatched as a part of a QRT, that's a police 3 officer who's not enforcing traffic laws. 4 That's a police officer who's not able to 5 respond to a domestic violence call. It's -- 6 it's more officers who have to respond solo and 7 without, you know, a second officer present to 8 those types of cases. 9 Q. And -- and again, am I correct that 10 you're not aware of any statistics, hard 11 statistics, about the activities that those 12 officers did not do because they were involved 13 in the Quick Response Teams? 14 A. No. It's hard to quantify what you 15 didn't do, I guess. 16 Q. All right. Then you say there that 17 you used grant dollars for drug court 18 expansion. 19 A. Uh-huh. 20 Q. So this was grant -- grant dollars 21 received from a third party? 22 A. From the federal government. 23 Q. From the federal government. Okay. 24 So this is not -- this is not Summit County tax 25 money you're talking about?</p>

<p style="text-align: right;">Page 210</p> <p>1 A. No, but they're dollars that might 2 have otherwise been used for other 3 opportunities in the County. 4 Q. Were -- was that in the grant 5 documents? Is that money tailored for other -- 6 excuse me -- targeted for other uses? 7 A. That was a DOJ grant that was -- I 8 don't -- it was not specifically for drug 9 courts, but it was fashioned by Summit County 10 employees in an effort to make our needs meet 11 the requirements of the grant, as I recall. 12 Like, it was a pretty broad one. 13 You could apply for many different reasons. 14 But as I recall, it was -- we tailored it to -- 15 to expand drug court. 16 Q. Well, and you don't -- I take it 17 you don't know -- you don't know you would 18 have -- you would have received the grant for a 19 different use for those same funds? 20 MS. KEARSE: Object to form. 21 A. I mean, I can't predict the federal 22 government. I don't think anybody can these 23 days. So, no, I couldn't say that we would 24 have gotten it or not. 25 Q. All right. I think we've covered</p>	<p style="text-align: right;">Page 212</p> <p>1 coordinate efforts and leverage funds, and 2 those are, you know -- personally those are 3 hours that were not spent doing things that 4 could have enhanced our community. Those 5 are -- those are hours that were spent 6 specifically doing things that we would not 7 have been doing had this epidemic not taken 8 place in Summit County. 9 So public services is -- I guess I 10 sort of was just thinking police, but certainly 11 all of the public servants who work for the 12 County, in addition to public health and ADM, 13 have diverted our personal resources to this 14 issue. 15 Q. Have you tracked the -- the 16 hours -- 17 A. No. 18 Q. -- that you spent on this? 19 A. I have not. 20 Q. Do you know if anybody else in the 21 County has done that? 22 A. I don't. But certainly I can 23 personally tell you I have spent what I am 24 confident are hundreds of hours at boards and 25 commission meetings on behalf of the County for</p>
<p style="text-align: right;">Page 211</p> <p>1 the first -- first bullet -- 2 A. Okay. 3 Q. -- pretty thoroughly. 4 Is there anything we have -- we've 5 failed to cover on the first bullet? 6 I -- so maybe we can move to the 7 second one. "Costs for providing health care 8 and medical care for patients suffering from 9 opioid-related addiction or disease, including 10 overdoses and deaths." 11 A. I'm sorry. If I could go back to 12 the first one. 13 Q. Sure. 14 A. So because of the prevalence of the 15 opioid epidemic -- 16 Q. Uh-huh. 17 A. -- lots of tasks -- task forces, 18 boards, commissions, things like that have 19 sprung up in an effort to educate and -- and 20 promote and -- and treat and combat the whole 21 thing, and a lot of person hours are being 22 devoted to those. So myself, our public safety 23 director, the executive, my staff, the public 24 safety staff have spent countless hours on 25 these boards and commissions trying to</p>	<p style="text-align: right;">Page 213</p> <p>1 this specific purpose. 2 Q. You were not hired specifically by 3 the County for that purpose, correct? 4 A. I was not hired by the County? 5 Q. To -- to deal with opioid issues. 6 Or were you? 7 A. That wasn't the only reason. I -- 8 I think my knowledge of the criminal justice 9 system and my advocacy platform certainly lent 10 itself to the position that the executive hired 11 me at. 12 Q. Did the position that you -- that 13 you were hired for exist before you were hired 14 for it? 15 A. It did the way I was hired. I was 16 hired in as a deputy director of law, and that 17 was a position that existed. 18 January 1st of last year, the new 19 position of assistant chief of staff was 20 created. 21 Q. And then -- and you're also the 22 public spokes- -- 23 A. Correct. Public information 24 officer. 25 Q. Public information officer.</p>

<p style="text-align: right;">Page 238</p> <p>1 for providing mental health services, 2 treatment, counseling, rehabilitation service, 3 and social service to victim of the opioid 4 epidemic and their families." 5 Now, I think a lot of these 6 categories overlap. 7 A. Yeah. 8 Q. So I think a lot of this one we've 9 already talked about. 10 Is there anything that fits in this 11 category that you haven't already described for 12 me? 13 A. I don't know that we've talked a 14 lot about Children's Services and the costs 15 associated with the increased treatment and 16 placement. 17 Q. We have a whole separate bullet 18 point -- 19 A. Oh, that's right. Sure. Okay. 20 Q. -- for that one later. So let's -- 21 MS. KEARSE: And I'm -- I'm sorry. 22 Which bullet point are you on? 23 MS. WINNER: We're on the last one 24 on page 15. 25 MS. KEARSE: Okay. All right.</p>	<p style="text-align: right;">Page 240</p> <p>1 MS. WINNER: Oops. Okay. 2 MR. JOHNSON: Oh, now they did. 3 MS. WINNER: Now we're back on. 4 MR. JOHNSON: Thank you. 5 A. So this was done in response to a 6 need for not only more treatment beds, but also 7 a variety of treatment options for folks. It 8 really -- it's a large tract of land that the 9 County owns and had for sale that we certainly 10 didn't sell to anyone else because we felt it 11 was so imperative to create this availability 12 of space for -- for these treatment providers. 13 Q. Where is this land located? 14 A. It's located in Lakemore, which is 15 interesting because it's a landlocked community 16 inside of Springfield, which is just east of 17 Akron. 18 Q. You said you had it for sale. How 19 long had it been for sale? 20 A. I don't know when the last -- when 21 it -- the last tenants. So it -- I don't know 22 how long it had been for sale. 23 Q. The -- are these, Hope United and 24 Dan Gregory's group, whatever its name is, 25 limited to opioid addiction treatment?</p>
<p style="text-align: right;">Page 239</p> <p>1 A. So directly from the County, 2 because of the increased demand for inpatient 3 treatment, as well as other forms of services 4 and counseling centers, the County donated 5 land. There are two separate 501(c)(3) groups 6 in Summit County who were working together and 7 are working together. One called Hope United, 8 which is seeking to create a community center 9 specifically for folks recovering from opioid 10 addiction. 11 The other is called -- I've lost 12 it. Dan Gregory's group. It will come to me 13 as I talk about it. They are looking to build 14 an inpatient facility. And they approached the 15 County multiple times looking for land or a 16 building that would make sense. 17 Because we could not find the right 18 fit for something they could purchase, we 19 donated over 20 acres of land to these two 20 501(c)(3)s in an effort to co-locate them and 21 provide, really, a campus for treatment. This 22 was done essentially because we saw the need 23 and -- 24 MR. JOHNSON: They didn't turn the 25 telephone back on.</p>	<p style="text-align: right;">Page 241</p> <p>1 A. I don't think that they are limited 2 to, but they came to us because of. Both of 3 their families are personally affected by the 4 opioid epidemic. 5 Hope United was founded by Travis 6 and Shelly Bornstein, and they lost their son 7 to an overdose. And he was a college athlete 8 who became addicted to opioids, and when no -- 9 he could no longer get those, he turned to 10 heroin. And he overdosed, and his body was 11 dumped in a field. And so they very quickly 12 mobilized their community to support this 13 effort of having a place of hope for people to 14 go to. 15 And Dan's organization, he also has 16 a family member who has been directly impacted 17 by opioid addiction that started with 18 medication and now has turned to heroin. 19 Q. And what is the source of your 20 information about how his addiction started? 21 A. I talked with him. 22 Q. With him? He told you that? 23 A. I talked with Dan, and I talked 24 with Shelly and Travis Bornstein. They lost 25 their son.</p>

<p style="text-align: right;">Page 242</p> <p>1 Q. Okay. But my point is, did you --</p> <p>2 do you have any information, other than what</p> <p>3 these family members told you about that?</p> <p>4 A. No. He's dead. I mean, this is</p> <p>5 what happened to him.</p> <p>6 Q. Well, but, I -- again, you're --</p> <p>7 you're a former prosecutor. You know the</p> <p>8 difference between hearsay and direct -- direct</p> <p>9 evidence.</p> <p>10 Do you have any personal knowledge</p> <p>11 on that point or is it you just know what they</p> <p>12 told you?</p> <p>13 MS. KEARSE: Object to form.</p> <p>14 A. I believe that the parents knew</p> <p>15 what their child was doing when he was taking</p> <p>16 prescription medication prescribed to him by</p> <p>17 his physician after an injury. And they know</p> <p>18 that he then started seeking heroin. And they</p> <p>19 know this because he died with a needle in his</p> <p>20 arm.</p> <p>21 Q. And that's what they've told you;</p> <p>22 is that correct?</p> <p>23 A. That's also what a police report</p> <p>24 indicates in the way that he died.</p> <p>25 Q. And does the police report include</p>	<p style="text-align: right;">Page 244</p> <p>1 police departments in Summit County now have a</p> <p>2 drop-off box, and --</p> <p>3 Q. Is that what a dump site is --</p> <p>4 A. Yeah.</p> <p>5 Q. -- a drop-off box?</p> <p>6 A. Yes, yes. And there have been</p> <p>7 several initiatives, drug take-back days, where</p> <p>8 there's specified locations for folks to turn</p> <p>9 in unused medications.</p> <p>10 Q. Who runs that?</p> <p>11 A. It depends. Obviously, all of the</p> <p>12 different police departments monitor their own</p> <p>13 drop boxes. The DEA certainly has, I think,</p> <p>14 either one or two specified days per year, but</p> <p>15 local law enforcement groups have done their</p> <p>16 own, and it has gone to a point where we've had</p> <p>17 local high school groups organize some of these</p> <p>18 sort of take-back or turn-in days.</p> <p>19 Q. All right. Well, what is --</p> <p>20 what -- just focusing in on the county again.</p> <p>21 A. Uh-huh.</p> <p>22 Q. What -- what has Summit County done</p> <p>23 in this category?</p> <p>24 A. Well, the health department</p> <p>25 participates in those, as well as ADM. Those</p>
<p style="text-align: right;">Page 243</p> <p>1 any independent information about the source of</p> <p>2 his opioid use?</p> <p>3 A. I don't recall exactly what the</p> <p>4 police report says.</p> <p>5 Q. Okay. On this, have we now covered</p> <p>6 either in our conversation just now or in our</p> <p>7 conversation before the break, everything</p> <p>8 that -- that's covered within -- of the last</p> <p>9 bullet point on page 15?</p> <p>10 A. That's the best of my ability at</p> <p>11 this point, yes.</p> <p>12 Q. Okay. Why don't we skip over the</p> <p>13 next bullet point and talk about the second</p> <p>14 bullet point on page 16.</p> <p>15 A. Uh-huh.</p> <p>16 Q. Which is costs associated with</p> <p>17 various public safety and health initiatives</p> <p>18 related to the opioid epidemic. And again, I</p> <p>19 don't want us to be repeating ourselves.</p> <p>20 A. Sure.</p> <p>21 Q. So is there anything in that</p> <p>22 category beyond what we've already talked about</p> <p>23 here today?</p> <p>24 A. The number of dump sites for</p> <p>25 medication has increased. I know that most</p>	<p style="text-align: right;">Page 245</p> <p>1 are -- a lot of those initiatives are driven</p> <p>2 out of the Opiate Task Force meetings. So the</p> <p>3 health department and -- and the ADM are</p> <p>4 involved in all of those efforts for those</p> <p>5 initiatives.</p> <p>6 Q. Well, other than the -- is there</p> <p>7 anything else other than the dump sites and the</p> <p>8 drug take-back days that fits in this category,</p> <p>9 beyond the things that we've already talked</p> <p>10 about. I realize some of them would probably</p> <p>11 fit --</p> <p>12 A. Yeah.</p> <p>13 Q. -- into this category also.</p> <p>14 A. Did we talk about the fentanyl</p> <p>15 strips and needles with this?</p> <p>16 Q. You have.</p> <p>17 A. Okay.</p> <p>18 Q. Anything else?</p> <p>19 A. The -- Dr. Smith and Dr. Kohler</p> <p>20 presenting at continuing medical education</p> <p>21 programs. As far as initiatives, that's --</p> <p>22 that's what I can come up with at this point.</p> <p>23 Q. Now, the -- the dump sites for</p> <p>24 medication and the drug take-back days, those</p> <p>25 are not limited to opioids, are they?</p>

<p style="text-align: right;">Page 246</p> <p>1 A. No.</p> <p>2 Q. All right. The costs associated</p> <p>3 with the increased burden on Plaintiff's drug</p> <p>4 courts, are there specific initiatives</p> <p>5 associated with opioids that have been</p> <p>6 undertaken by the drug courts?</p> <p>7 A. They've had to increase capacity.</p> <p>8 As far as initiatives, I guess I don't know</p> <p>9 exactly how to frame that other than to say</p> <p>10 there's been an increase in who becomes</p> <p>11 eligible for drug court, or I -- we call it</p> <p>12 "Hope Court" in municipal court. It's "Turning</p> <p>13 Point" in common pleas court. But I guess it's</p> <p>14 commonly referred to as "drug court."</p> <p>15 But it used to be, 10 and 15 years</p> <p>16 ago even, the only courses that went to drug</p> <p>17 court was drug cases, possession cases, and</p> <p>18 there's been a shift in policy and in thought</p> <p>19 that it should be expanded to cover theft cases</p> <p>20 or other things that were committed as a result</p> <p>21 of addiction and drug-seeking behavior.</p> <p>22 So the expansion of and sort of the</p> <p>23 change in philosophy has certainly required</p> <p>24 additional probation officers, additional</p> <p>25 caseworkers. Common pleas court now has two</p>	<p style="text-align: right;">Page 248</p> <p>1 talk about to incur -- to expand the</p> <p>2 eligibility, that isn't limited to people with</p> <p>3 opioid problems, is it?</p> <p>4 A. No. But I really think it was the</p> <p>5 opioid epidemic that awakened this sort of</p> <p>6 sensibility about rather than criminalizing</p> <p>7 this behavior, looking at the root of why this</p> <p>8 person committed theft or why this person</p> <p>9 committed forgery of this check, rather than</p> <p>10 just, you know, the punishment for writing a</p> <p>11 bad check on, you know, either a closed account</p> <p>12 or someone else's account. And -- and seeing</p> <p>13 that the reason they did it was they were</p> <p>14 trying to get money to buy opioids.</p> <p>15 So I think that that created an</p> <p>16 entire shift in -- in sort of the ideology in</p> <p>17 our community that -- looking at what we call</p> <p>18 crime as part of addiction.</p> <p>19 Q. Well, let me ask you this. If --</p> <p>20 if opioids were to disappear tomorrow so that</p> <p>21 all you had --</p> <p>22 A. Please.</p> <p>23 Q. Yeah. I think we all agree with</p> <p>24 that. At least illegal opioids.</p> <p>25 MS. KEARSE: Objection.</p>
<p style="text-align: right;">Page 247</p> <p>1 judges. It expanded from one of our three</p> <p>2 municipal courts to there's now a second drug</p> <p>3 court. And Barberton Municipal Court and the</p> <p>4 Stow Municipal Court has an agreement with</p> <p>5 Akron so that some of their defendants can use</p> <p>6 the services in Akron.</p> <p>7 Q. Okay. But I want to focus again on</p> <p>8 Summit, what Summit County --</p> <p>9 A. Right, and we --</p> <p>10 Q. -- has incurred here.</p> <p>11 A. -- we -- so the court system is 100</p> <p>12 percent Summit County, the common pleas court</p> <p>13 system.</p> <p>14 Q. Okay. I see.</p> <p>15 A. Yes. So that's general fund money</p> <p>16 for the most part. Some of the grant funds</p> <p>17 that we talked about previously helped support</p> <p>18 drug court, but that -- that is a Summit County</p> <p>19 cost.</p> <p>20 Q. To the extent Summit County --</p> <p>21 okay, Summit County versus another</p> <p>22 jurisdiction. But some of that money may be</p> <p>23 paid with grant funds?</p> <p>24 A. Yes.</p> <p>25 Q. Now, this policy change that you</p>	<p style="text-align: right;">Page 249</p> <p>1 Q. And if the -- if opioids were to --</p> <p>2 the opioid problem was to disappear tomorrow</p> <p>3 and all you had left were cocaine addicts, meth</p> <p>4 addicts, people addicted to other substances, I</p> <p>5 assume you would still -- you know, Summit</p> <p>6 County would still want to have a drug court</p> <p>7 for those people?</p> <p>8 A. Yes. We had a drug court before</p> <p>9 the opioid epidemic.</p> <p>10 Q. And this policy change is something</p> <p>11 you would probably still keep in place?</p> <p>12 A. I would certainly hope so.</p> <p>13 Q. Okay. Costs associated with</p> <p>14 cleanup of public parks, spaces, and facilities</p> <p>15 of needles and other debris and waste of opioid</p> <p>16 addiction. Is this something that's actually</p> <p>17 tracked somehow in the county?</p> <p>18 MS. KEARSE: Object to form.</p> <p>19 A. I would suggest that that be</p> <p>20 referred to Mr. Nelson, that the -- Summit</p> <p>21 County Metroparks is a separate entity. They</p> <p>22 are funded by a levy. So I don't know what</p> <p>23 their tracking on that part is.</p> <p>24 Q. Do you know anything about this</p> <p>25 cost category?</p>

<p style="text-align: right;">Page 250</p> <p>1 A. I do not.</p> <p>2 Q. Loss of tax revenue due to</p> <p>3 decreased efficiency and size of the working</p> <p>4 population in Plaintiff's communities, and due</p> <p>5 to other impacts on property values and other</p> <p>6 tax generators for Plaintiff.</p> <p>7 Has there been any kind of study</p> <p>8 done to evaluate this category of loss?</p> <p>9 A. Not by Summit County. We do have a</p> <p>10 division of workforce development, and we also</p> <p>11 have an economic and community development</p> <p>12 division within the executive's office. And</p> <p>13 part of what we do in that division is make</p> <p>14 house calls, essentially, to the businesses in</p> <p>15 Summit County.</p> <p>16 And the number one complaint or the</p> <p>17 number one need of employers in Summit County</p> <p>18 is workforce. And by and large these are</p> <p>19 manufacturing jobs. And going one step</p> <p>20 further, the number one issue is having folks</p> <p>21 who can pass a drug test, and there's a lot of</p> <p>22 concern from our business community that they</p> <p>23 can't expand because the workforce is not</p> <p>24 healthy enough to do so.</p> <p>25 And, again, as I previously said,</p>	<p style="text-align: right;">Page 252</p> <p>1 Q. And that is generally considered at</p> <p>2 the level of full employment, correct?</p> <p>3 A. I don't know -- I don't know how to</p> <p>4 respond to that.</p> <p>5 Q. Do you -- but 4 percent is a pretty</p> <p>6 low unemployment rate, is it not?</p> <p>7 MS. KEARSE: Object to form.</p> <p>8 A. I think it depends on if you're one</p> <p>9 of the people who's employed and if you're one</p> <p>10 of the people who is looking for a workforce.</p> <p>11 Q. Well, let me ask you this way. If</p> <p>12 you are somebody who is looking for a</p> <p>13 workforce, you typically will have a much more</p> <p>14 difficult time filling positions at 4 percent</p> <p>15 unemployment rate than, say, at 7 or 8 or 10</p> <p>16 percent unemployment rate, correct?</p> <p>17 A. I think it depends on the industry.</p> <p>18 And the unemployment rate doesn't look at our</p> <p>19 underemployment, where we've got folks who</p> <p>20 perhaps were nurses or other professionals that</p> <p>21 are regulated by the State, who now, with a</p> <p>22 felony conviction, can no longer practice in</p> <p>23 the field they were previously, you know,</p> <p>24 paying income tax and owned a home and now work</p> <p>25 at minimum wage jobs or a lower paying wage job</p>
<p style="text-align: right;">Page 251</p> <p>1 there are a lot of industries that are</p> <p>2 regulated, either by statute or ordinance, that</p> <p>3 disallow felons. And with this epidemic</p> <p>4 creating a new class of not only sick people,</p> <p>5 it created a new class of sometimes</p> <p>6 unemployable people in certain fields because</p> <p>7 of their felony classification.</p> <p>8 And again, it's also an issue of</p> <p>9 how can we measure what we didn't know? When</p> <p>10 you couldn't look at a newspaper in 2016</p> <p>11 without seeing a headline about death and</p> <p>12 opioid affliction in the community, it's hard</p> <p>13 to say what we missed when it comes to economic</p> <p>14 development or tax generators, because, A, we</p> <p>15 were busy trying to address the issue, and, B,</p> <p>16 if you were a site selector at that time, I</p> <p>17 can't imagine that Summit County would have</p> <p>18 been a desirable location if you were looking</p> <p>19 to relocate a new manufacturing plant or a</p> <p>20 headquarters of some type of economic</p> <p>21 development industry.</p> <p>22 Q. What's the unemployment rate in</p> <p>23 Summit County right now?</p> <p>24 A. I think it's right around 4</p> <p>25 percent.</p>	<p style="text-align: right;">Page 253</p> <p>1 than previously.</p> <p>2 Q. How many people are in that</p> <p>3 category?</p> <p>4 A. I don't know.</p> <p>5 Q. Are you aware of any specific</p> <p>6 business investments that businesses have</p> <p>7 considered making in Summit County but have not</p> <p>8 made as a result of the opioid crisis?</p> <p>9 A. No. As I said, trying to capture</p> <p>10 what you never knew was happening is -- is</p> <p>11 incredibly difficult, at least for us.</p> <p>12 Q. And Northeast Ohio has had -- been</p> <p>13 struggling with attracting investment for a</p> <p>14 number of years now, hasn't it?</p> <p>15 A. I -- I don't really want to speak</p> <p>16 for Northeast Ohio. I feel like Summit County</p> <p>17 has weathered the financial crisis in some</p> <p>18 better ways than most, but it's because we've</p> <p>19 been -- we operate with a thousand less</p> <p>20 employees than we did 10 years ago, so I</p> <p>21 couldn't say what Northeast Ohio has -- has or</p> <p>22 has not you attracted.</p> <p>23 Q. Well, as the -- was the -- did the</p> <p>24 financial crisis hit Summit County hard?</p> <p>25 A. Yes, it did.</p>

<p style="text-align: right;">Page 254</p> <p>1 Q. Is there -- are there any specific 2 tax revenue streams that you can identify for 3 which you believe there is a quantifiable 4 impact? 5 A. I would have to defer to -- to 6 Mr. Nelson that, on the tax revenue streams. I 7 mean, we're a sales-tax-based fund, our -- I 8 would defer to Mr. Nelson that one. 9 Q. So is the answer you don't know? 10 MS. KEARSE: Object to form. 11 A. As I sit here today, I -- I can't 12 answer that question. 13 Q. When it talk -- when you -- when 14 this response talks about tax revenue, is it 15 talking about sales tax revenue? 16 A. I think it includes sales tax -- 17 sales tax revenue, but also income tax revenue. 18 When you're not working, you're not paying 19 income tax, and -- and that can impact the 20 County as well. While we don't collect income 21 tax, what affects Akron affects Summit County, 22 and when their numbers are down, we have to 23 find ways to help support our 31 communities. 24 And so when, quote-unquote, 25 business is good for the 31 communities,</p>	<p style="text-align: right;">Page 256</p> <p>1 the page, talks about cost associated with 2 impact of opioid epidemic on Plaintiff's 3 vehicle fleets. 4 What does that relate to? 5 MS. KEARSE: Object to form. 6 MS. WINNER: Oh, you meant -- you 7 were objecting to my tone of voice. 8 MS. KEARSE: Well, I didn't want to 9 say it that way, but, yeah. 10 MS. WINNER: Yeah, okay. Fair 11 enough. 12 MS. KEARSE: I guess you were 13 responding to how I said "object to form." 14 (Laughter.) 15 MS. KEARSE: We got to have some 16 fun at this. 17 A. So there are multiple fleets of 18 vehicles in the County. Surprising number of 19 vehicles. And as I sit here, the -- the thing 20 that really stands out to me is that, you know, 21 buying new vehicles for our sheriff's 22 department, for the investigators and the 23 prosecutor's office, all the way down to the 24 surveyors for the fiscal office, certainly when 25 the bottom line is impacted, the timeliness of,</p>
<p style="text-align: right;">Page 255</p> <p>1 business is also good for Summit County. And 2 likewise, when it's not, the strain and the 3 leveraging of dollars has to become much more 4 creative. 5 Q. So am I correct that Akron charges 6 income tax, but Summit County does not? 7 A. Well, that -- that's our primary -- 8 the way our general fund is -- is set up is 9 that we operate -- all counties in Ohio operate 10 on sales tax revenue. 11 Q. Are there any other tax revenues 12 that the County receives that are affected, you 13 believe, by the opioid crisis? 14 A. Sitting here today, I don't -- I 15 don't know that I can come up with any. 16 MS. KEARSE: And for the record, I 17 think she already deferred to Mr. Nelson as 18 well, so if there's anything she's missing, 19 Mr. Nelson can fill that in for you. 20 MS. WINNER: I'm sure Mr. Nelson 21 will be a fount of information. 22 MS. KEARSE: Save some time. 23 MS. WINNER: We will. 24 Q. Okay. Let me then ask -- go down a 25 couple more, toward the next to last bullet on</p>	<p style="text-align: right;">Page 257</p> <p>1 you know, replacement -- I certainly hope it's 2 not repair -- but replacement of these vehicles 3 isn't a priority when we're using our funds 4 elsewhere. Beyond that, I can't speak to that 5 one. 6 Q. Okay. Then go on, the next one is 7 costs for Plaintiff to properly and adequately 8 abate the nuisance created by the opioid 9 epidemic. 10 And, again, excluding everything 11 you've already described, is there anything 12 else that falls into this category? 13 A. This one's hard for me, because 14 there's so much that I cannot, as -- as an 15 attorney and as whatever my hats are, I'm not 16 an economist. These kids who have gone into 17 our Children's Services system, the babies born 18 addicted, the people who this -- this entire 19 population who is now living with addiction. 20 Luckily, we've gotten better at 21 harm reduction, but what that means is that now 22 we have this population of people who are 23 living with addiction who are going to our 24 community health center for methadone every 25 single day. The costs for that, to me, are</p>

<p style="text-align: right;">Page 258</p> <p>1 endless.</p> <p>2 So, I mean, we've -- as I said,</p> <p>3 there's always a dead horse that needs to be</p> <p>4 beaten somewhere, but we have gone over so many</p> <p>5 of these things, but we haven't talked about</p> <p>6 the future. These costs we've been talking</p> <p>7 about in the past tense. These are costs that</p> <p>8 are being incurred today. They are costs --</p> <p>9 these same costs are going to be incurred</p> <p>10 tomorrow. There are still kids coming into CSB</p> <p>11 at higher rates than before.</p> <p>12 And so it's like looking at these</p> <p>13 numbers from the past and putting them out into</p> <p>14 when? I don't know, because the generational</p> <p>15 addiction that's been created by this epidemic</p> <p>16 is something that we've never seen before, and</p> <p>17 so it's hard for me, as an attorney and not an</p> <p>18 economist, to project what we might need for</p> <p>19 these kids and for these families.</p> <p>20 Q. Is that your full answer?</p> <p>21 A. That is.</p> <p>22 Q. All right. Then the last bullet is</p> <p>23 costs for child services and foster care for</p> <p>24 opioid-dependent babies and foster children.</p> <p>25 And you talked a little bit about</p>	<p style="text-align: right;">Page 260</p> <p>1 alarming is that that isn't the case with</p> <p>2 opioids, because it's a familial addiction.</p> <p>3 Mom is addicted. Brother is addicted.</p> <p>4 Grandparent is addicted. And so the ability to</p> <p>5 place a child with a family member has</p> <p>6 decreased. And when the child has to be placed</p> <p>7 with a non-family member, the costs of that</p> <p>8 placement are higher than they are with a</p> <p>9 family member.</p> <p>10 Q. Well, I'm -- one thing that just</p> <p>11 struck me as you were talking just now is you</p> <p>12 talked about familial addiction. When a --</p> <p>13 when you see, you know, mom, dad, grandma, all</p> <p>14 addicted to opioids, did all of them start with</p> <p>15 prescription opioids from a doctor, or does it</p> <p>16 start with one particular family member and</p> <p>17 then it spreads to others?</p> <p>18 A. My experience has shown me that</p> <p>19 when one person comes home with a bottle full</p> <p>20 of 60 or 90 pills and that person either uses</p> <p>21 or doesn't use them all, the readily available</p> <p>22 supply in the home is what leads to this</p> <p>23 familial addiction. Everybody has access to</p> <p>24 this oversupply, and it's right there in front</p> <p>25 of them because there are so many pills.</p>
<p style="text-align: right;">Page 259</p> <p>1 this earlier. I guess my first question is, to</p> <p>2 what extent are the -- the -- are child</p> <p>3 services and foster care services tracked in</p> <p>4 terms of the extent to which they relate</p> <p>5 explicitly to opioid addiction?</p> <p>6 A. I believe in -- in 2016, our</p> <p>7 Children's Services Bureau began tracking,</p> <p>8 like, a specific -- I don't know what they</p> <p>9 would call it, but I would call it, like, the</p> <p>10 entrance point, what brought this kid into our</p> <p>11 system. And I believe it was in 2016, maybe</p> <p>12 later in the year, they began specifically</p> <p>13 identifying those. And I believe Director</p> <p>14 Barnes talked about that, that they had seen an</p> <p>15 increase to the point that it became imperative</p> <p>16 that they focus on it so that they could</p> <p>17 quantify and understand how to budget for it.</p> <p>18 The costs for foster care and</p> <p>19 placement have grown additionally, because with</p> <p>20 the prior forms of addiction that we'd seen in</p> <p>21 Summit County -- crack, methamphetamine,</p> <p>22 cocaine -- familial placement was always</p> <p>23 priority. Can a -- can this child be placed</p> <p>24 with a family member?</p> <p>25 And what has been incredibly</p>	<p style="text-align: right;">Page 261</p> <p>1 Q. If somebody were able to make -- to</p> <p>2 wave a magic wand and make heroin and fentanyl</p> <p>3 disappear, would the opioid epidemic in Summit</p> <p>4 County look different than it does now?</p> <p>5 MS. KEARSE: Object to form. Calls</p> <p>6 for speculation.</p> <p>7 A. I mean, if I had a magic wand, I'd</p> <p>8 go back much farther than that and make sure</p> <p>9 that the doctors and our community was educated</p> <p>10 about the addiction rates and levels and let</p> <p>11 people know, if you get addicted to this, you</p> <p>12 are very likely going to be out in the street</p> <p>13 looking for heroin.</p> <p>14 Q. Okay. But that wasn't my question.</p> <p>15 My question was if heroin wasn't available</p> <p>16 anymore, fentanyl wasn't available anymore,</p> <p>17 what impact, if any, would that have on the</p> <p>18 opioid situation in Summit County?</p> <p>19 A. If it --</p> <p>20 MS. KEARSE: Object to form.</p> <p>21 A. If it wasn't available in Summit</p> <p>22 County and people were addicted to opioids,</p> <p>23 they'd go someplace else to get it. That's</p> <p>24 how -- that's how this addiction is</p> <p>25 functioning. The -- it's not like they're</p>

<p style="text-align: right;">Page 262</p> <p>1 not -- they're going to stay in bed and be 2 like, "Meh, it's not out there, so I'm good." 3 The pill sickness that people get is what 4 drives them out to find that heroin, because 5 the pills were too expensive or harder to get. 6 So, I mean, that magic wand -- 7 heroin's been around. It's not like this is 8 the first time heroin has been in Summit 9 County. But it was not so incredibly prevalent 10 until the space created by the opioid industry 11 brought it upon us. 12 So, yeah, it would change if there 13 wasn't any heroin available or fentanyl 14 available, but I still have this huge addicted 15 population who are going to be sick, who are 16 going to be seeking pills or seeking opium in 17 some fashion. 18 Q. Would you expect overdoses to 19 decline in that situation? 20 A. Well, certainly the overdoses from 21 fentanyl, if it wasn't available, would go 22 away. But I don't -- I don't know that I 23 can -- can speculate to that. 24 Q. Okay. That's fair enough. Let me 25 ask you, actually, a different question that I</p>	<p style="text-align: right;">Page 264</p> <p>1 Ohio's Amended Responses and 2 Objections to the Manufacturer 3 Defendants' First Set of 4 Interrogatories and the National 5 Retail Pharmacy Defendants' First 6 Set of Interrogatories Re: 30(b)(6) 7 Topics, was marked for purposes of 8 identification.) 9 - - - - - 10 (Thereupon, Deposition Exhibit 11, 11 Plaintiffs The City of Cleveland, 12 County of Cuyahoga, County of Summit 13 and City of Akron's Supplemental 14 Amended Responses and 15 Objections to the Manufacturer 16 Defendant's First Set of 17 Interrogatories, Submitted Pursuant 18 to Discovery Ruling No. 13, was 19 marked for purposes of 20 identification.) 21 - - - - - 22 (Thereupon, Deposition Exhibit 12, 23 Spreadsheet Titled "Confidential 24 Protected Health Information - 25 Produced Under a Protective Order -</p>
<p style="text-align: right;">Page 263</p> <p>1 intended to ask you earlier, and I forgot. 2 Has Summit County seen an issue 3 with drug dealers selling counterfeit 4 prescription opioids? 5 A. As far as -- I know that there have 6 been some that were like fentanyl that were 7 being told as -- yes, I'm -- I am aware of 8 that. 9 Q. Has that been a significant 10 problem? 11 A. I mean, any time fentanyl is in the 12 community, if it's less than a milligram, it's 13 a significant problem, because we know how 14 potent it is. 15 MS. WINNER: I think I'm going to 16 turn it over to one of my colleagues, so why 17 don't we go off the record so we can switch 18 places and move our boxes around. 19 THE WITNESS: Sure, okay. 20 THE VIDEOGRAPHER: Off the record 21 at 3:15. 22 (A recess was taken.) 23 - - - - - 24 (Thereupon, Deposition Exhibit 10, 25 Summit County and the City of Akron,</p>	<p style="text-align: right;">Page 265</p> <p>1 Attorneys' Eyes Only, was marked for 2 purposes of identification.) 3 - - - - - 4 (Thereupon, Deposition Exhibit 13, 5 Spreadsheet Titled "Confidential 6 Protected Health Information - 7 Produced Under a Protective Order - 8 Attorneys' Eyes Only, was marked for 9 purposes of identification.) 10 - - - - - 11 (Thereupon, Deposition Exhibit 14, 12 1/8/2019 Letter from Atty Linda 13 Singer to Special Master David Cohen 14 Re: Plaintiffs' Response to 15 Manufacturer Defendants' Renewed 16 Motion to Compel Immediate and Full 17 Compliance with Discovery Ruling 18 Nos. 5 and 13, was marked for 19 purposes of identification.) 20 - - - - - 21 (Thereupon, Deposition Exhibit 15, 22 Spreadsheet Titled "Confidential 23 Protected Health Information - 24 Produced Under a Protective Order - 25 Attorneys' Eyes Only, was marked for</p>

<p style="text-align: right;">Page 266</p> <p>1 purposes of identification.) 2 - - - - - 3 (Thereupon, Deposition Exhibit 16, 4 Spreadsheet Titled "Confidential 5 Protected Health Information", was 6 marked for purposes of 7 identification.) 8 - - - - - 9 (Thereupon, Deposition Exhibit 17, 10 Document Listing Names and Dates of 11 Summit County Overdose Deaths, was 12 marked for purposes of 13 identification.) 14 - - - - - 15 THE VIDEOGRAPHER: On the record at 16 3:38. 17 EXAMINATION OF GRETA JOHNSON 18 BY MS. FEINSTEIN: 19 Q. Good afternoon, Ms. Johnson. 20 A. Good afternoon. 21 Q. My name is Wendy West Feinstein. 22 We met briefly this morning before we went on 23 the record. I represent the Teva Defendants. 24 I'm going to take over the 25 examination now, and a few of my colleagues may</p>	<p style="text-align: right;">Page 268</p> <p>1 Plaintiffs used to identify the information 2 required by the interrogatories at issue in 3 Discovery Ruling No. 5. 4 Q. Do you understand that ruling? 5 A. Yes, I do. 6 Q. Have you had an opportunity to 7 review the Plaintiff's responses pursuant to 8 Special Master Cohen's order? 9 A. Yes. 10 Q. And did you do that in preparation 11 for your deposition today? 12 A. I -- I didn't do it for week -- the 13 weekend. 14 Q. You didn't do it for fun. 15 A. Yes, yes. I absolutely did, yes. 16 Q. Did you speak with anyone, aside 17 from counsel, to prepare to testify on these 18 topics? 19 A. No, I -- not specifically about 20 those interrogatories. 21 Q. Did you talk with anyone at 22 Rawlings about these topics? 23 A. No. 24 Q. Did you review any documents 25 specifically to respond to these top- -- or to</p>
<p style="text-align: right;">Page 267</p> <p>1 have some additional questions after I'm done, 2 okay? 3 A. Sure. 4 Q. You were designated on a number of 5 topics, and my colleague, Ms. Winner, went 6 through some of those topics with you about 7 your designations. Four of the topics that 8 were not in the letter, but that were 9 confirmed by e-mail, were Topics 4, 5, 6, and 10 19. 11 A. Yes. I'm familiar with that. 12 Q. Are you prepared to testify on 13 those topics today? 14 A. I am. 15 MS. FLOWERS: To be clear, though, 16 it's not 4, 5, 6 and 19. It's 4, 5, 6, and 19 17 as rewritten by Special Master Cohen. 18 MS. FEINSTEIN: Exactly. Yes. 19 Thank you, Counsel. And we can read that into 20 the record now. 21 Special Master Cohen, after some 22 back and forth among counsel, revised those 23 topics and directed that with respect to Topics 24 4, 5, 6, and 19, Plaintiffs must designate a 25 person to testify on the criteria that</p>	<p style="text-align: right;">Page 269</p> <p>1 be prepared to testify about these topics? 2 A. Other than the interrogatories and 3 the responses? Outside of that, just 4 discussion with counsel. 5 Q. Did you review Special Master 6 Cohen's order? 7 A. I've seen it, yes. 8 Q. And it's attached to Exhibit 1, 9 right? 10 A. Yes, yes. 11 Q. Okay, good. During the break, your 12 counsel and everyone here was very patient as I 13 handed you a series of documents, and I'd like 14 to go through those right now. 15 The -- the first document that we 16 marked as an exhibit and that I put in front of 17 you should be Exhibit 10, which is Summit 18 County and the City of Akron, Ohio's Amended 19 Responses and Objections to the Manufacturer 20 Defendants' First Set of Interrogatories and 21 the National Retail Pharmacy Defendants' First 22 Set of Interrogatories. 23 Do you have that in front of you as 24 Exhibit 10? 25 A. I do have that in front of me, yes.</p>